Eileen Dannemann presentation to ACCV, Sept. 3, 2010, Rockville, Md.

Attached to this presentation and distributed to the committee was Exhibit 4
*Statistical correction* -- Based on analysis of data from two different sources...
H1N1 vaccination program contributed to estimated 1,588 miscarriages
and stillbirths among women 17 to 45 years of age.

[http://www.progressiveconvergence.com/H1N1-RELATED%20miscarriages.htm](http://www.progressiveconvergence.com/H1N1-RELATED%20miscarriages.htm)

**Presentation:**

We have, at this count, 248 cases of H1N1 vaccine-related miscarriages
178 VAERS and 70 other sources.

I have spoken to nearly 20 of the mothers who miscarried and have declarations
from about 10.

Out of the 248 cases 7 were overlaps. Meaning that 7 women from one source
reported their adverse event to VAERS. With this we were able to do a
“capture/recapture” statistical analysis, taken into account the underreporting of
VAERS.

The capture/recapture estimate, while not 100% accurate is a very well accepted
and cost effective way of attempting to get a complete count of all cases when two of
more ascertainment sources (VAERS and our NCOW survey) have failed to collect all
existing cases.

The ascertainment-corrected estimate for the total number of 2009-A-H1N1 flu-
short-related miscarriages and stillbirths during the 2009/10-flu season is 1,588
which is confidence interval between 946-3587. That is, the lower and upper range-
probability of miscarriage and stillbirths due to the H1N1 vaccine was as low as 946
and as high as 3,587.

The CDC ascertained that there were 56 maternal deaths (assuming the fetuses died
with them). Dr. Alicia Siston's study acknowledged that most of these deaths were
unconfirmed as being H1N1 virus cause of death despite the fact that the CDC had
tests that could have verified for certain that these were H1N1 related deaths.

Initially, at the beginning of the H1N1 pandemic consequence management drill
there were allegedly 30 maternal deaths. It was these deaths that the CDC used as
propaganda to initiate a campaign to vaccinate the pregnant population.

The gals that I spoke to stated that they were coerced in the most aggressive
manner. That their doctors told them that the would die or kill their baby.
In 2007/2008 there were 7 total VAERS reports on vaccine-related fetal demise. In 2009/10 there were 178 VAERS and 70 other source with 7 over laps...that is 241 reports.

Simplistically speaking not vaccinating would have been at the low range 85 times safer for the fetus than vaccinating or at the higher range 192 times safer. From the grow child in-utero point of view it would have been safer not to vaccinate.

Since the variables (component or synergy of components) in the 2009 H1N1 vaccine have not been identified as to the cause of the H1N1 vaccine-related fetal deaths, we recommend that the ACIP/CDC cease recommending to vaccine providers, and to the public, flu shots to pregnant women; that they adhere to the FDA and manufacturers’ warnings that the flu shot be given to pregnant women only if clearly needed.

The new 2010/11 season combination flu shot contains variables found in the 2009 H1N1 flu shot, including the controversial Thimerosal

Considering that the 56 maternal deaths in Dr. Alicia’s Siston’s study allegedly due to the H1N1 virus itself, are unverified H1N1 virus related, we emphasize that inoculating pregnant women with another untested vaccine containing a combination of components found in the offending 2009 H1N1 vaccine is insupportable.

We emphasize that it can be argued that it was an act of gross negligence that the CDC failed to inform their vaccine providers of the incoming VAERS data of the reports of suspected H1N1 vaccine related fetal demise. It can also be argued that the CDC willfully withheld the information to their vaccine providers that the 30 original maternal deaths were mostly unconfirmed.

We recommend strongly, considering that the same major questionable components, the H1N1 component and Thimerosal will be used in the 2010/11 season in a combination flu shot that all vaccine providers are appraised of last seasons VAERS reports as in concerns pregnant women and that pregnant be given the vaccine information that properly advised of the risk to benefit as stated herein. And that the CDC withdraws their recommendation to pregnant women and adhere to the FDA/manufacturers warning on the insert packages that the flu shot not be given to pregnant women unless clearly needed.

It is my understanding that the CDC got away with transcending the FDA warning and vaccinating the pregnant women with an untested vaccines because…a pandemic engenders the “clear needed” caveat….that vaccinating pregnant women was “clearly needed” during a pandemic or potential pandemic. Moreover, the CDC proof in the pudding for this egregious initiative was the 30 maternal deaths, albeit clearly “unconfimed”